

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

FEB 08 2022

11-10-22

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr. Leland NICKNAME Lacy	FIRST Leland LAST Lacy MI F SUFFIX	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 516 W. Twohig Ave. San Angelo TX 76903 <input type="checkbox"/> Change of Address		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 227-3430		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr. Casey NICKNAME Poynor	FIRST Casey LAST Poynor MI SUFFIX	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 705 W. Ratliff Rd San Angelo TX 76904 (Residence or Business)		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 226-3906		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year Month Day Year 1 / 1 / 2022 THROUGH 1 / 30 / 2022		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description 03 / 01 / 2022 <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Judge, County Court at Law #2	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
<input type="checkbox"/> Additional Pages COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME		
	COMMITTEE ADDRESS		
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME <u>Lacy, Leland</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>7,000.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>4,750.00</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>21,500.00</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>40,000.00</u>

18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Lacy

Signature of Candidate/Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by Leland Lacy this the 8th day of February.

20 22 to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.

(street)

(city)

(state)

(zip code)

(country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.

(month)

(year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME <i>Leland F. Lacy</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>7,000.00</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>1,600.00</i>
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ <i>40,000.00</i>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>4,750.00</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/1/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Cade Browning	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code 802 Mulberry Abilene TX 79601		
8 Contributor's principal occupation attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Browning Law Firm, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/3/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Javier Barrera	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 255 Loch Ness Rd San Angelo TX 76901		
Contributor's principal occupation Investigator		Contributor's job title Investigator
Contributor's employer/law firm Tom Green County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/5/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: Harvey McCall	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 9916 Vistadale Dr. Dallas TX 75238		
Contributor's principal occupation Project manager		Contributor's job title Project Manager
Contributor's employer/law firm Comerica Bank		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/5/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lance Pendley	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 6245 Choctaw Place, Frisco TX 75034		
8 Contributor's principal occupation Insurance sales		9 Contributor's job title Salesman
10 Contributor's employer/law firm McGriff		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 1/9/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sharon Cross	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 3417 Silver Spur Dr. San Angelo TX 76904		
Contributor's principal occupation homemaker		Contributor's job title homemaker
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 1/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Chad Inderman	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code P.O. Box 731 Lubbock, TX 79408		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Glasheen, Valles, & Inderman, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers) 6
4 Date 1/14/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Frank Brown	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 1430 W. Avenue J, San Angelo TX 76901		
8 Contributor's principal occupation attorney		9 Contributor's job title attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 1/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Max Puella	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 2505 School House Dr San Angelo TX 76904		
Contributor's principal occupation Realtor		Contributor's job title Realtor
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 1/21/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sterling Fryar	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 6725 Harvester Ln San Angelo TX 76904		
Contributor's principal occupation Broker		Contributor's job title Real Estate Broker
Contributor's employer/law firm Keller Williams		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/26/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Charles Meadows	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 12501 Hidden View Dr. San Angelo TX 76904		
8 Contributor's principal occupation outfitter		9 Contributor's job title outfitter
10 Contributor's employer/law firm Live Oak Outfitters		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Paul Parker	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 2319 W. Avenue K, San Angelo, TX 76903		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/27/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Desiree Gomez	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1225 S. Monroe St. San Angelo, TX 76901		
Contributor's principal occupation Legal assistant		Contributor's job title Legal assistant
Contributor's employer/law firm Paul Parker, Atty. at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 Date 1/27/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lane Lacy	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 5118 Knickerbocker Rd San Angelo, TX 76904		
8 Contributor's principal occupation Broker		9 Contributor's job title Broker
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 1/29/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Dwain Grider	Amount of contribution (\$) 900.00
Contributor address; City; State; Zip Code 3406 Shady hill Dr. San Angelo, TX 76904		
Contributor's principal occupation Sales		Contributor's job title Senior Account Manager
Contributor's employer/law firm Arxada		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 1/18/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lauren Marromaras	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2198 Copper Rock Rd. San Angelo TX 76904		
Contributor's principal occupation Appraiser trainee		Contributor's job title Appraiser trainee
Contributor's employer/law firm Angelo Appraisals		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <u>6</u>
2 FILER NAME <u>Leland F. Lacy</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>1/16/22</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <u>Stephanie May</u>	7 Amount of contribution (\$) <u>250.00</u>
6 Contributor address; City; State; Zip Code <u>303 W. Harris Ave - San Angelo, TX</u> <u>Ste. 3</u>		
8 Contributor's principal occupation <u>Attorney</u>		9 Contributor's job title <u>attorney</u>
10 Contributor's employer/law firm <u>Self</u>		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Contributor address; City; State; Zip Code	Amount of contribution (\$)
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

PLEDGED CONTRIBUTIONS (JUDICIAL)**SCHEDULE B(J)**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B(J): <u>1</u>	
2 FILER NAME <u>Leland F. Lacy</u>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES		\$	
5 Date <u>1/1/2022</u>	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: <u>Gaye Pelzel</u>	8 Amount of Pledge \$ <u>1000.00</u>	9 In-kind contribution description
7 Pledgor address; City; State; Zip Code <u>2202 CR347 Miles TX 76861</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Pledgor's principal occupation <u>retired</u>		11 Pledgor's job title <u>retired</u>	
12 Pledgor's employer/law firm <u>n/a</u>		13 Law firm of pledgor's spouse (if any)	
14 If pledgor is a child, law firm of parent(s) (if any)			
Date <u>1/1/22</u>	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: <u>Louis Perez III</u>	Amount of Pledge \$ <u>600.00</u>	In-kind contribution description
Pledgor address; City; State; Zip Code <u>4746 Royal Troon Dr. San Angelo TX 76904</u>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of Pledge \$	In-kind contribution description
	Pledgor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Pledgor's principal occupation		Pledgor's job title	
Pledgor's employer/law firm		Law firm of pledgor's spouse (if any)	
If pledgor is a child, law firm of parent(s) (if any)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

LOANS (JUDICIAL)

SCHEDULE E(J)

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): 2
2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 7/26/2021	7 Name of lender; <input type="checkbox"/> out-of-state PAC (ID#: Leland & Laura Lacy	9 Loan Amount (\$) 20,000.00
6 Is lender a financial institution? Y N X	8 Lender address; City; State; Zip Code 516 W. Twohig Ave San Angelo, TX 76903	10 Interest rate 0%
		11 Maturity date 12/31/2022
12 Lender's Principal Occupation Attorney/appraiser		13 Lender's Job Title
14 Lender's Employer/Law Firm Tom Green County/self		15 Law Firm of lender's spouse (if any)
16 If lender is a child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> none		18 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is a child, law firm of parent(s) (if any)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

\$

7 Name of lender

☐ out-of-state PAC (ID#: _____)

9	Loan Amount (\$)
---	------------------

29,000.00

8 Lender address;

City;

State;

Zip Code

10 Interest rate

Y N V

11 Maturity date
12/31/2022

12 Lender's Principal Occupation

13 Lender's Job Title

15 Law Firm of lender's spouse (if any)

14 Lender's Employer/Law Firm

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

☒ none

18

☒ Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address:

City:

State:

Zip Code

☒ not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/1/2022		5 Payee name First Financial Bank			
6 Amount (\$) 5.00		7 Payee address; City; State; Zip Code P.O. BOX 701 Abilene TX -			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) fees		(b) Description paper statement fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 1/6/22		Payee name San Angelo Live/Joe Hyde Interactive			
Amount (\$) 1500.00		Payee address; City; State; Zip Code 2001 W. Beauregard Ave San Angelo TX 76901			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising		Description online advertising		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 1/10/2022		Payee name Allyn Media			
Amount (\$) 1000.00		Payee address; City; State; Zip Code 3838 Oak Lawn Ave. Ste. 400 Dallas TX 75219			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising		Description social media		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/12/22		5 Payee name Stacey Leigh Patterson			
6 Amount (\$) 75.00		7 Payee address; City; State; Zip Code Oak Mountain San Angelo, TX 76903			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) design-advertising		(b) Description design-advertising		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/12/22		Payee name Allyn Media			
Amount (\$) 640.17		Payee address; City; State; Zip Code ballas TX 75238			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising		Description yard signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/14/2022		Payee name Office Depot/office Max			
Amount (\$) 337.20		Payee address; City; State; Zip Code Sunset Blvd. San Angelo TX 76904			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) advertising/printing expense		Description brochures		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Leland F. Lacy		3 Filer ID (Ethics Commission Filers)	
4 Date 1/21/2022		5 Payee name Company Printing			
6 Amount (\$) 937.50		7 Payee address; 3419 Knickerbocker Rd.		City; San Angelo TX	State; Zip Code 76904
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) printing expense		(b) Description brochures		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/21/2022		Payee name Angelo Awards			
Amount (\$) 214.93		Payee address; 1605 W. Avenue N		City; San Angelo TX	State; Zip Code 76904
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense		Description car magnets, name tags		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/27/2022		Payee name Papel			
Amount (\$) 40.59		Payee address; 2413 Sherwood Way		City; San Angelo TX	State; Zip Code 76901
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) printing expense		Description printing - invitations		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED